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### **FACSIMILE COVER SHEET**

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FROM: JOHN KILYK, JR./KLM

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To:

COMMISSIONER FOR PATENTS

United States Patent and Trademark Office

ALEXANDRIA, VA 22313

FACSIMILE NUMBER: (703) 872-9306

IN RE APPLN. OF:

APPLICATION NO.

Griffith et al. 10/792,307

FILED:

March 3, 2004

FOR:

TRANSDUCTIN-1 AND TRANSDUCTIN-2 AND APPLICATIONS TO HEREDITARY DEAFNESS

ATTORNEY DOCKET: 227540

#### ATTACHED PLEASE FIND THE FOLLOWING DOCUMENTS:

REQUEST TO ASSOCIATE APPLICATION WITH CUSTOMER NUMBER (1 PAGE)

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION AND POWER OF ATTORNEY
(5 PAGES)

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PATENT

Attorney Docket No. 227540 DHHS Reference No. E-168-2001/1-US-01

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Griffith et al.

For:

Art Unit: 1652

Application No. 10/792,307

Examiner: Unassigned

Filed: March 3, 2004

.

TRANSDUCTIN-1 AND TRANSDUCTIN-2 AND

APPLICATIONS TO HEREDITARY DEAFNESS

## REQUEST TO ASSOCIATE APPLICATION WITH CUSTOMER NUMBER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Please associate the subject application with Customer Number:

45733

Correspondence concerning this application should be directed to Leydig, Voit & Mayer, Ltd.: Customer Number 45733.

45733

The undersigned has power of attorney with respect to the subject application, as evidenced by the attached document, which is a copy of a previously filed document in the subject application or a parent application.

Respectfully submitted,

John/Kilyk, Jr., Reg/No. 30/163

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Date: January 11, 2005

PATENT
Attorney Docket No. 227540
DHHS Ref. No. E-168-2001/1-US-01

# COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION AND POWER OF ATTORNEY

☐ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)				
As a below named inventor, I hereby declare that:				
My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
TRANSDUCTIN-1 AND TRANSDUCTIN-2 AND APPLICATIONS TO HEREDITARY DEAFNESS				
the specification of which:				
is attached hereto.  was filed on March 3, 2004 as Application No. 10/792,307 and was amended on (if applicable).				
was filed by Express Mail No. as Application No. not known yet, and was an ended on (if applicable).				
☐ was	filed on as in the control of any).	PCT International App	lication No. PCT/	and was amended on
I state that I have reviewed and understand the contents of the specification identified above, including the claim(s), as amended by any amendment referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.				
I claim foreign priority benefits under 35 USC 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application(s) designating at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application(s) for patent, utility model, design registration, inventor's or plant breeder's rights certificate(s), or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter and having a filing date before that of the application(s) from which the benefit of priority is claimed.				
,		The tan Pilia - Data	Priority Claimed	Certified Copy Arrached?
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	YES NO	YES NO
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			<u> </u>	
	<del>                                     </del>			
		· · · · · · · · · · · · · · · · · · ·		

As a named inventor, I hereby appoint the National Institutes of Health, Office of Technology Transfer, 6011 Executive Blvd., Ste. 325, Rockville, Maryland 20852-3804, Telephone (301) 496-7056, as Principal Attorneys to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith: Customer Number 05318.

05318

Please recognize Leydig, Voit, & Mayer, Ltd. as Associate Attorneys in this case: Customer Number 23460.

23460

I further direct that correspondence concerning this application be directed to Leydig, Voit & Mayer, Ltd.: Customer Number 23460.

23460

I declare that all statements made herein of my own knowledge are true, that all statements made on information and belief are believed to be true, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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